

PATTERSON, THUENTE, SKAAR & CHRISTENSEN, P.A.

4800 IDS Center
80 South 8th Street
Minneapolis, Minnesota 55402 USA
Telephone: (612) 349-5740
Toll Free: 1-800-331-4537
Facsimile: (612) 349-9266

FACSIMILE COVER SHEET

RECEIVED
CENTRAL FAX CENTER
FEB 08 2005

TOTAL NUMBER OF PAGES BEING SENT (INCLUDING COVER SHEET): 13☐

Original Documents To Follow By Mail

☒

No Originals Will Be Sent

DATE: February 8, 2005**TO:** U.S.P.T.O.**FAX #:** 703-872-9306**PHONE:****APP. NO.:** 10/606,039**OUR REF.:** 3329.02UE03**FROM:** Matthew T. Macari, Esq.**PHONE #:** 612-349-5759

THIS FACSIMILE TRANSMISSION CONTAINS LEGALLY PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED FOR THE PARTY IDENTIFIED ABOVE. IF YOU HAVE RECEIVED THIS TRANSMISSION IN ERROR, PLEASE CALL PATTERSON, THUENTE, SKAAR & CHRISTENSEN COLLECT AT (612) 349-5740. DISTRIBUTION, REPRODUCTION OR ANY OTHER USE OF THIS TRANSMISSION BY ANY PARTY OTHER THAN THE INTENDED RECIPIENT IS STRICTLY PROHIBITED.

FACSIMILE SENT BY: GTS

Customer No. 24113
 Patterson, Thuent, Skaar & Christensen, P.A.
 4800 IDS Center
 80 South 8th Street
 Minneapolis, Minnesota 55402-2100
 Telephone: (612) 349-5740
 Facsimile: (612) 349-9266

Attorney Docket No. 3329.01JS03

AMENDMENT TRANSMITTAL

In re the application of:

Bruce E. Thomas et al.

Confirmation No.: 3931

Application No.: 10/606,039

Examiner: Blair M. Johnson

Filed: June 25, 2003

Group Art Unit: 3634

For: DOOR WITH VARIABLE LENGTH SCREEN

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

Enclosed are:

- ☒ Amendment (14 pages).
☒ Petition for Extension of Period for Response.
☐ _____

The filing fee has been calculated as shown below:

	Claims Remaining After Amendment	Highest No. Previously Paid For	Percent Extra (Equals)	Small Entity Rate	Add'l Fee	OR	Large Entity Rate	Add'l Fee
Total	11	- 45	= 0	x 25	\$		x 50	\$
Indep.	2	- 5	= 0	x 100	\$		x 200	\$
Mult. Dep.			=	+ 180	\$		+ 360	\$
TOTAL					\$	OR	TOTAL	\$

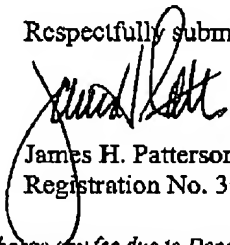
☐ First Presentation of Multiple Dependent Claim [MDC]

- * If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

Application No. 10/603,039

- [] Applicant(s) is/are entitled to small entity status in accordance with 37 CFR 1.27.
- [X] The Commissioner is hereby authorized to charge payment of any fees under 37 C.F.R. § 1.16 for presentation of extra claims or credit any overpayment to Deposit Account No. 16-0631.

Respectfully submitted,

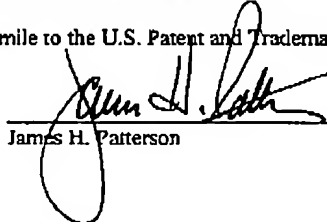

James H. Patterson
Registration No. 30,673

Please grant any extension of time necessary for entry; charge any fee due to Deposit Account No. 16-0631.

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office, Fax No. 703-871-9306 on the date shown below.

02/08/05
Date


James H. Patterson